



Agency Benefits Coordinator Meeting

Benefits 101: Local Ed and Local Gov

Commonly Used BA Acronyms

ABC	Agency Benefits Coordinator
ACH	Automated Clearing House
ADM	Administrative
AE	Annual Enrollment
BA	Benefits Administration
BEP	Basic Education Plan
BIL	Direct Billing
CC	Corrections and Clarification form
CNP	Cancel for Non-Payment
COCC	Certificate of Credible Coverage
CR	Cancel request
CSA	Central State Agency
DEP	Dependent
DIV	Divorce
DNTL	Dental

DOB	Date of Birth
DOR	Date of Retirement
EAP	Employee Assistance Program
EBB	End Benefits Billing
EE	Employee
ELIG	Eligibility
ER	Employer
FSCM	Accounting Side of Edison
HED	Higher Education
HCM	Benefits (HR) Side of Edison
HIPAA	Health Insurance Portability and Accountability Act
IC	Insurance Committee
LE	Local Education
LG	Local Government

Commonly Used BA Acronyms

LOA	Leave of Absence
MAC	Maximum Allowable Change
MED	Medical
MED SUPP	Medicare Supplement
MSC	Miscellaneous
OBF	Office of Business and Finance
OE	Open Enrollment
One Ded	One-time Deduction
OSA	Optional Special Accident
OOS	Out of Sequence
PPO	Preferred Provider Organization
PPACA	Patient Protection and Affordable Care Act
PY	Payroll
PPACA	Patient Protection and Affordable Care Act

REH	Rehire
RET	Retirement
RFL	Return from Leave
SBB	Start Benefits Billing
SLB	Sick Leave Bank
SQE	Special Qualifying Event
SUS	Suspend
TBR	Tennessee Board of Regents
TER	Termination
UT	University of Tennessee
VIS	Vision
W/C	Workers Comp

About the Plan

- The State Group Insurance Program (also called the Plan) covers three different populations (called entities):
 - State and Higher Education Employees
 - Local Education Employees
 - Local Government Employees
- \$1.6 billion annually and cover nearly 300,000 members
- The health plan is **self-insured**
 - The State (not an insurance company) pays claims from premiums collected from members and their employers
- Benefits Administration manages the State Group Insurance Program and works with Agency Benefits Coordinators (ABCs) in the agencies to serve plan members

Health Benefits



Common Terms



Out of Pocket
Maximum



Premium



Copay



Coinsurance

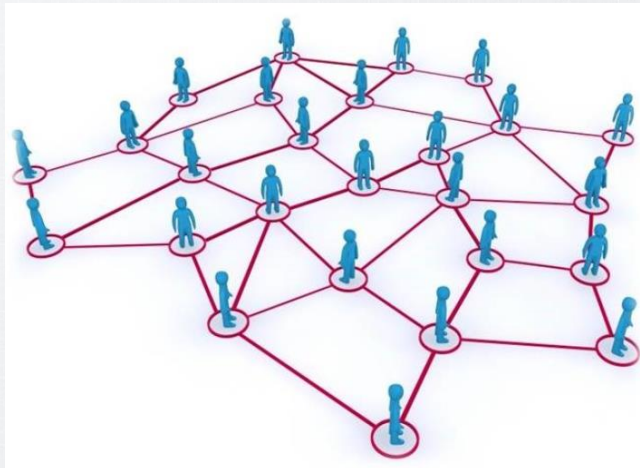


Deductible

What is a Network?

A group of doctors, hospitals and other healthcare providers, that have an agreement with a carrier.

- Services are provided at set fees that are discounted rates
- In-network providers cost less



Networks

Employees have the choice of three networks of doctors and facilities. Please ensure that employees check the network for their providers as changes can occur

- BlueCross BlueShield Network S
- Cigna LocalPlus (LP)
- Cigna Open Access Plus (OAP)- this is a larger, broad network but costs much more each month



Plans

- Local Government and Local Education agencies offers 4 plan options:
 - Premier PPO
 - Standard PPO
 - Limited PPO
 - CDHP//HSA
- A PPO is a Preferred Provider Organization
- How a PPO Works:
 - Members have access to a network of doctors and facilities that charge a pre-negotiated fees
 - The member may pay **more** for services from **out-of-network** providers



Premier and Standard Plans

Premier	Standard
Higher premium Lower deductible 10% coinsurance	Lower Premium Higher deductible 20% coinsurance



2019 Local Education Premiums

2019 Active Employees Monthly Health Premiums

ALL REGIONS			
	BCBST	CIGNA LOCALPLUS	CIGNA OPEN ACCESS
PREMIER PPO			
Employee Only	\$627	\$627	\$667
Employee + Child(ren)	\$1,034	\$1,034	\$1,074
Employee + Spouse	\$1,223	\$1,223	\$1,303
Employee + Spouse + Child(ren)	\$1,630	\$1,630	\$1,710
STANDARD PPO			
Employee Only	\$587	\$587	\$627
Employee + Child(ren)	\$969	\$969	\$1,009
Employee + Spouse	\$1,146	\$1,146	\$1,226
Employee + Spouse + Child(ren)	\$1,526	\$1,526	\$1,606
LIMITED PPO			
Employee Only	\$537	\$537	\$577
Employee + Child(ren)	\$885	\$885	\$925
Employee + Spouse	\$1,047	\$1,047	\$1,127
Employee + Spouse + Child(ren)	\$1,395	\$1,395	\$1,475
LOCAL CDHP/HSA			
Employee Only	\$456	\$456	\$496
Employee + Child(ren)	\$751	\$751	\$791
Employee + Spouse	\$889	\$889	\$969
Employee + Spouse + Child(ren)	\$1,184	\$1,184	\$1,264

The premium amounts shown reflect the total monthly premium. Please see your agency benefits coordinator for your monthly deduction, the state's contribution and your employer's contribution, if applicable.

2019 Local Government Premiums

2019 Active Employees Monthly Health Premiums

ALL REGIONS						
	LEVEL 1		LEVEL 2		LEVEL 3	
	BCBST & CIGNA LOCALPLUS	CIGNA OPEN ACCESS	BCBST & CIGNA LOCALPLUS	CIGNA OPEN ACCESS	BCBST & CIGNA LOCALPLUS	CIGNA OPEN ACCESS
PREMIER PPO						
Employee Only	\$662	\$702	\$740	\$780	\$804	\$844
Employee + Child(ren)	\$1,027	\$1,067	\$1,146	\$1,186	\$1,246	\$1,286
Employee + Spouse	\$1,424	\$1,504	\$1,590	\$1,670	\$1,729	\$1,809
Employee + Spouse + Child(ren)	\$1,789	\$1,869	\$1,997	\$2,077	\$2,172	\$2,252
STANDARD PPO						
Employee Only	\$620	\$660	\$693	\$733	\$753	\$793
Employee + Child(ren)	\$962	\$1,002	\$1,074	\$1,114	\$1,168	\$1,208
Employee + Spouse	\$1,334	\$1,414	\$1,489	\$1,569	\$1,620	\$1,700
Employee + Spouse + Child(ren)	\$1,676	\$1,756	\$1,871	\$1,951	\$2,034	\$2,114
LIMITED PPO						
Employee Only	\$481	\$521	\$538	\$578	\$585	\$625
Employee + Child(ren)	\$747	\$787	\$834	\$874	\$907	\$947
Employee + Spouse	\$1,036	\$1,116	\$1,157	\$1,237	\$1,258	\$1,338
Employee + Spouse + Child(ren)	\$1,302	\$1,382	\$1,452	\$1,532	\$1,580	\$1,660
LOCAL CDHP/HSA						
Employee Only	\$434	\$474	\$483	\$523	\$525	\$565
Employee + Child(ren)	\$671	\$711	\$750	\$790	\$815	\$855
Employee + Spouse	\$931	\$1,011	\$1,039	\$1,119	\$1,130	\$1,210
Employee + Spouse + Child(ren)	\$1,170	\$1,250	\$1,306	\$1,386	\$1,420	\$1,500

The premium amounts shown reflect the total monthly premium. The different premium levels are based on the demographics of your agency. Please see your agency benefits coordinator for your monthly deduction, your employer's contribution or if you are unsure as to which premium level applies to you.

Telehealth

You can talk to a doctor by phone or computer from anywhere, at anytime.

When to use Telehealth

- For non-emergency medical issues(allergies, asthma, bronchitis, cold & flu, infections, fever, ear aches, nausea, pink eye, sore throat)
- 24 hours a day, seven days a week-including nights, weekends, and holidays
- Your doctor or pediatrician is unavailable
- You are traveling and need medical care

State-Sponsored Telehealth program cost

- PPO Members: Copay is \$15 (in-network)
- CDHP Members: You pay the negotiated rate per visit until you reach your deductible, then the primary care office visit coinsurance applies
- In order to utilize this service they must pre-register with their network carrier (BCBST or Cigna) and go through the network carrier programs (PhysicianNow, MDLive, or Amwell)



Pharmacy Benefits

The logo for CVS Caremark, featuring the word "CVS" in a bold, red, sans-serif font above the word "CAREMARK" in a red, serif font. A vertical red line is positioned to the right of the text.

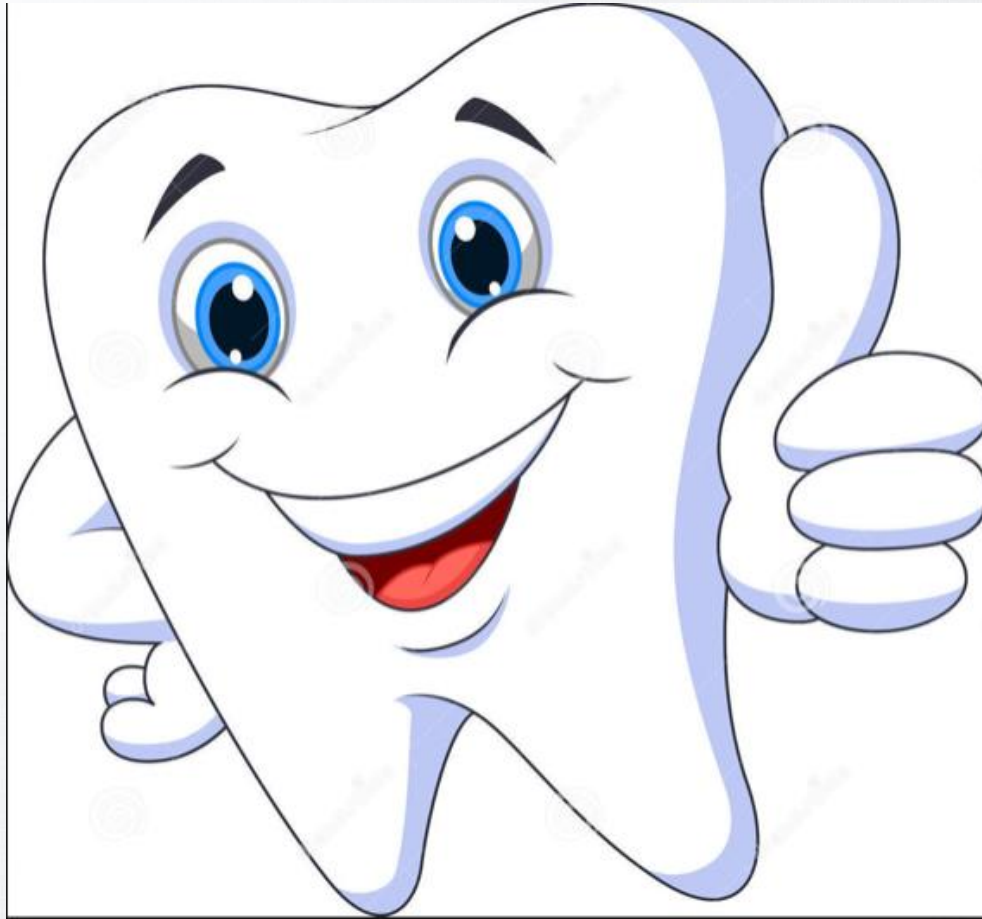
Pharmacy Benefits

- Pharmacy benefits are included when enrolled in a health plan.
- Out of Pocket Pharmacy costs is based on two different factors:
 - The member's plan option, and
 - The drug level (tier) of the medication
- There are four drug levels:

Generic Drug (Tier One)	Least Expensive	A generic medicine is FDA approved and equal to the brand name product in safety, effectiveness, quality and performance.
Preferred Brand (Tier Two)	More Expensive	Many popular and highly used preferred brands are included on the preferred drug list (PDL).
Non-Preferred Brand (Tier Three)	Most Expensive	These belong to the most expensive group of drugs. These drugs are not included on the PDL.

Specialty drug tier: In the PPOs, 10% coinsurance applies with a member minimum (\$50, unless the drug cost is under \$50, then you would pay the full cost of the drug) and a maximum (\$150) out-of-pocket. Members enrolled in a CDHP pay coinsurance for specialty drugs.

Dental Benefits



Optional Dental Benefits

- Eligible LE/LG employees can choose between two dental plans:

Cigna Prepaid Plan

- Participating dentists only
- Fixed co-pays
- No deductibles
- No waiting periods
- Pre-existing conditions are covered
- Referrals to specialist are required
- Orthodontic treatment is not covered if the treatment plan began prior to the member's effective date of coverage with Cigna

MetLife DPPO Plan

- Any dentist
- Pay less with in-network providers
- Pay co-insurance for basic, major, orthodontic and out-of-network covered services.
- Some services require a waiting period
- Referrals to a specialists are not required

- Each year during the Annual Enrollment, eligible employees can enroll in or transfer between dental options

2019 Dental Premiums

2019 MONTHLY DENTAL PREMIUMS	CIGNA PREPAID PLAN	METLIFE DPPO PLAN
ACTIVE MEMBERS		
Employee Only	\$13.44	\$23.64
Employee + Child(ren)	\$27.91	\$54.36
Employee + Spouse	\$23.83	\$44.72
Employee + Spouse + Child(ren)	\$32.76	\$87.50

Vision Benefits



Optional Vision Insurance

- Eligible LE/LG employees can choose between two vision plans:

Basic Plan

- Discounted rates
- Allowances

Expanded Plan

- Co-pays
- Allowances
- Discounted rates

- Administered by Davis Vision
- For a specific provider go to <http://www.davisvision.com/stateofTN>
- Each year during the Annual Enrollment, eligible employees can enroll in or transfer between vision plans.

2019 Vision Premiums

2019 MONTHLY VISION PREMIUMS	BASIC PLAN	EXPANDED PLAN
ACTIVE MEMBERS		
Employee Only	\$3.07	\$5.56
Employee + Child(ren)	\$6.13	\$11.12
Employee + Spouse	\$5.82	\$10.57
Employee + Spouse + Child(ren)	\$9.01	\$16.35

Enrollment



Online Enrollment through ESS

- Members select health insurance and other benefit options online
- Log in to Edison www.edison.tn.gov
 - » Edison employee ID number provided by the Agency Benefits Coordinator
 - » Employees can utilize the First Time User/Password Reset link on the homepage to retrieve their access ID and password
 - » Click Self Service and follow prompts for enrollment
 - » A step-by-step guide is available on the ABC website
- If covering dependents, submit dependent verification by:
 - » Uploading documents via ESS
 - » Submit documents via document upload in Zendesk

Online Enrollment through eForm

- ABC select health insurance and other benefit options via Edison Benefit enrollment eForm
- Log in to Edison www.edison.tn.gov
 - » Agency Benefits Coordinator utilizes Benefit eForm to enter benefits
 - » Agency Benefit Coordinator attaches dependent documents to the eForm
 - » Form is submitted directly to BA
 - » A step-by-step guide is available on the website

ID Cards

BlueCross BlueShield

- Will send up to two ID cards automatically, both with the member's name
- These may be used by any covered dependent

Cigna

- Will send separate ID cards for each insured family member with each participant's name
- There may be up to four ID cards in each envelope

- **CVS Caremark** will send separate ID cards for your pharmacy benefits (Note: each family member's card may arrive in a separate envelope).
- If you enroll in dental or vision benefits, you will also receive your ID cards within three weeks.

Questions?